

(From the San Diego Union, May 27, 1936)

**DOCTORS WARNED AGAINST RELYING ON LABORATORIES  
Delegates Urged Not to Abandon Old Knowledge  
For Unproved Methods**

Modern medicine's greatest field of advancement in the last ten years, the laboratory, was rapped soundly yesterday in the feature address of the second day of the sixty-fifth annual California Medical Association convention at Hotel Del Coronado.

Dr. Campbell P. Howard,\* invited here to address the more than one thousand doctors on his findings as professor of medicine, McGill University Faculty of Medicine, Montreal, warned against placing too great reliance in "the comparatively untried developments of the modern laboratory."

In his novel presentation of cases reviewed from the first showing of symptoms until postmortem examination, he showed where apparently accepted laboratory truths had been responsible for the deaths in the cases cited.

"Laboratory work and the intricate machines developed to aid medical men are only the handmaidens to common-sense clinical medicine," he said. "Don't discard the common-sense knowledge accumulated over thousands of years for new, unproved methods developed in the last ten years."

He urged that doctors, however, take advantage of all the findings of laboratory experts and place them in their proper relationship to the physical examination and case history.

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**SESSION OPENED BY AUXILIARY OF MEDICOS' GROUP**

The seventh annual convention of the Woman's Auxiliary to the California Medical Association formally was opened yesterday morning at the Coronado Yacht clubhouse.

Mrs. Thomas J. Clark of Oakland, president, spoke of her year's objective—visiting each Auxiliary of the state in furtherance of the purpose of the Auxiliary, which is to form a link between medical science and the public. Nearly all have been visited, she said.

The organization of five new counties was reported—San Francisco, Siskiyou, Fresno, Marin, and Lassen-Plumas.

Welcome was extended members of the convention by Mrs. Emil C. Black, president of the San Diego branch, and Mrs. Elliott G. Colby was introduced. The Reverend Walter John Sherman offered the invocation.

Election of new officers will be the highlight of this morning's business session, beginning at 9:30 at the Coronado Yacht Clubhouse. Reports will be given by the seventeen county presidents and councilors of the nine districts.

(From the San Diego Union, May 28, 1936)

**EXPERT TESTIMONY "BUYABLE," DOCTOR SAYS;  
FLAYS COURTS**

Expert medical testimony is a purchasable commodity. Judges should be allowed to examine medical experts instead of having attorneys stage a battle of wits over them.

Enforcement of an existing section of the State Civil Code would end forever "abuses and absurdities" of present expert-testimony practice.

These statements yesterday, in a paper attacking California court procedure in medical questions, prepared by Dr. Harold D. Barnard, Los Angeles, and presented by Dr. George A. Tucker, Los Angeles, featured a meeting of the General Medicine Section of the California Medical Association convention at Hotel Del Coronado.

"Expert medical testimony is a purchasable commodity, subject to all of the distractions of conflicting opinion," it was stated. Medical experts, through their zeal to assist clients, may withhold certain information and may become advocates of the client rather than a matter-of-fact expert, under present systems.

"Judges should be given the authority to question expert medical witnesses directly without objection by attorneys rather than allow the attorneys' 'battle of wits' that now exists."

"Failing this, attempts should be made to have judges appoint unbiased and neutral experts, as now provided in Section 1871 of the Code of Civil Procedure. Strict enforcement of this section forever would destroy the grounds on which critics have called expert medical testimony a racket."

\* Dr. Campbell P. Howard, professor of medicine at McGill University, was one of the guest speakers at the Coronado annual session. (See April issue of CALIFORNIA AND WESTERN MEDICINE, page 301.) Press dispatches of June 3 announced his sudden death in Santa Monica on that day.

**TRUSTEES OF THE CALIFORNIA MEDICAL  
ASSOCIATION†**

**Articles of Incorporation**

Know All Men by These Presents:

That we, the undersigned, all of whom are residents of the State of California and active members of the California Medical Association and councilors or other officers thereof, according to the provisions of the constitution of said Association, propose to form a nonprofit cooperative corporation, having no capital stock, under the laws of the State of California, and particularly as embodied in Titles I and XXII of Part IV, Division First of the Civil Code of the State of California, and the provisions of acts amendatory thereof and supplemental thereto; and for the purpose of such incorporation we hereby unite in and adopt the following articles of incorporation, to wit:

First: That the name of this corporation is Trustees Of The California Medical Association.

Second: That the purpose for which this corporation is formed is:

1. To promote the objects and aid in carrying out the purposes for which the California Medical Association was and is organized, namely, to promote the science and art of medicine, the protection of public health, and the betterment of the medical profession.

2. To receive, hold, own, enjoy, improve, use, convey in trust, mortgage, pledge, lien, hypothecate, lease, exchange, grant, sell, convey, or otherwise dispose of, moneys and other personal property and real property delivered, assigned, conveyed or transferred to it by or for the said California Medical Association.

3. To appoint such agents and officers as its business may require, and such appointed agents may be either persons or corporations; to admit duly qualified persons to membership in the corporation and to expel any member pursuant to the provisions of its by-laws; to forfeit the membership of any member for violation of any agreement between him and the corporation or his violation of its by-laws; to purchase, lease or otherwise acquire, hold, own and enjoy, to sell, lease, mortgage and otherwise encumber and dispose of any and all and every kind or kinds of real and personal property including stock in other corporations, also to carry on any and all operations necessary or convenient in connection with the transaction of any of its business; to borrow money, to mortgage or pledge any property, real or personal, owned or held by this corporation; to secure any contracts made by it or any bonds, debentures, promissory notes or other obligations by it issued or incurred or guaranteed.

4. And in aid and furtherance of the foregoing purposes:

(a) To acquire by operation of law, gift, devise, bequest, lease, purchase, or otherwise; to own, hold, improve, enjoy, use; to grant, bargain, sell and convey, exchange, or otherwise dispose of, mortgage, convey in trust, pledge, lien, hypothecate, lease, hire, and deal in, any and all kinds of property, both real and personal, lands, tenements, and hereditaments, and any and every interest therein, corporeal or incorporeal, personal property, furniture, fixtures, books, libraries, shares of stock of corporations, bonds, notes, securities, and any and all kinds of choses in action.

(b) To make, enter into, execute, deliver, receive, transfer and carry out contracts of every kind and character with any person, firm, association, club, or public or private or municipal corporation; to invest and reinvest surplus or other funds of this corporation in such securities as may be authorized by law for investment of the funds of savings banks in the State of California.

(c) To purchase or otherwise acquire, construct, erect, maintain, alter, repair, reconstruct, furnish, conduct, and carry on a home and meeting place and library for said California Medical Association, and to purchase or otherwise acquire, own, hold, improve, and use all kinds of property, real, personal, or mixed, necessary or proper to

† See November, 1930, issue of CALIFORNIA AND WESTERN MEDICINE, pages 829-836, for by-laws of the Corporation, and other information. The articles of incorporation are here reprinted for the information of members of the California Medical Association, in connection with the editorial comments printed in this issue on page 460.

be used in connection therewith, and to hire, employ, and contract with persons, firms, or corporations, necessary or proper to maintain, operate, conduct and carry on the same.

(d) To purchase or otherwise acquire, own, hold, manage, conduct, print, publish, circulate and sell journals, magazines, pamphlets, books and bulletins concerning or relating to the art and science of medicine, the protection of public health and the betterment of the medical profession, and in support and aid of the purposes of the corporation; to purchase or otherwise acquire, hire, lease, use, conduct or operate, manage, mortgage, convey in trust, sell or otherwise dispose of printing presses, apparatus, machinery, tools, and devices for printing, engraving, lithographing, electrotyping, binding, and all equipment and appliances necessary or suitable to carry out the foregoing purposes.

(e) To do any and every act and thing necessary or incident to the exercise, accomplishment and fulfillment of the foregoing objects and purposes, and to exercise any and all other powers and rights permitted to corporations, organized under the above mentioned provisions of the laws of California. The enumeration of particular powers herein shall not be deemed to exclude by inference such legal powers as would be implied if no such expressed enumeration had been made.

Third: That the county in the State of California where the principal office of this corporation for the transaction of the business of the corporation is to be located is the city and county of San Francisco.

Fourth: That the number of directors of this corporation is seven (7), and that the names and residences of the directors who have been selected, and appointed, for the first year and until their successors shall have been elected and shall have accepted office are as follows:

Lyell C. Kinney, La Mesa, San Diego County.  
J. B. Harris, Arcade Park, Sacramento County.  
O. D. Hamlin, Oakland, Alameda County.  
Edward M. Palette, Los Angeles, Los Angeles County.  
George H. Kress, Santa Monica, Los Angeles County.  
Emma W. Pope, Berkeley, Alameda County.  
T. Henshaw Kelly, San Francisco.

Fifth: That the voting power and property rights and interest of each member of the corporation shall be equal to that of every other member of the corporation. Each member of the corporation shall be entitled to one vote upon all propositions submitted to, and to one vote for each director to be elected by, the members. Cumulative voting is expressly prohibited. The corporation shall have power to admit new members, who are duly qualified as hereinafter provided, who shall be entitled to vote and to share in the property of the corporation with the old members but without any beneficial interest therein in accordance with the general rule in these articles provided.

Sixth: That this corporation shall have no capital stock, but shall be composed of members, each of whom shall be an active member in good standing and a councilor or other officer according to the provisions of the constitution, as now existing or as it may hereafter be amended, of the California Medical Association, a voluntary association, originally formed March 12, 1856, to promote the science and art of medicine, the protection of public health, and the betterment of the medical profession, and now having its offices and headquarters at Room 2004, Four Fifty Sutter Building, 450 Sutter Street, San Francisco, California. Every person who is an active member of the California Medical Association in good standing, while he is and remains a councilor or other such officer of said Association, shall be entitled to become and shall be, without other or any action or proceeding (and in accordance with this general rule), a member of this corporation upon the issuance to, and acceptance by, him of a certificate of membership and giving his assent in writing to the articles of incorporation and the by-laws of this corporation, and his compliance with, all the provisions thereof relating to admission to membership.

Seventh: (a) A roll of members shall be kept and certificates of membership shall be issued to each and every member. Issuance to and acceptance by a member of a certificate of membership of this corporation shall be con-

clusive evidence of the consent of the member to become a member of this corporation, and of his agreement to comply with and be governed by all the provisions of these articles of incorporation and the by-laws of this corporation.

(b) Neither membership in this corporation, nor any certificate evidencing the same, nor the interest of any member in this corporation, or any of the assets thereof, shall (a) be subject to execution, or become or be, an asset of the estate of any deceased member, or of any member who may become insolvent or bankrupt; (b) descend to or vest in the heirs, legatees or devisees of any member; or (c) be transferable or assignable in any form, either by the voluntary or involuntary act of any member, or by operation of law. In the event of the death, insolvency or bankruptcy of any member or of any such attempted transfer or assignment of membership or of any certificate evidencing the same, or of any interest of any member in this corporation, or any of the assets thereof, whether by the voluntary act of the member or otherwise, such membership, certificate and all interest of any such member in this corporation, and all assets thereof, shall be immediately canceled, revoked and terminated.

Eighth: This corporation is not organized and its business shall not be conducted or carried on for profit to itself, or for the profit of its members. All beneficial interest of each member in this corporation, and in and to all the assets thereof, shall be held by him for the use and benefit of the California Medical Association.

Ninth: In the event of the dissolution of this corporation all of its assets and property after payment and satisfaction and discharge of all claims and demands against, and liabilities of, the corporation, shall be paid over, distributed, conveyed and transferred to the nominee or nominees of said California Medical Association, acting by and through the Council, viz., the board of councilors thereof.

In witness whereof, we have hereunto set our hands and seals this first day of May, 1930.

O. D. HAMLIN	(Seal)
LYELL C. KINNEY	(Seal)
J. B. HARRIS	(Seal)
T. HENSHAW KELLY	(Seal)
EMMA W. POPE	(Seal)
GEORGE H. KRESS	(Seal)
MOTT H. ARNOLD	(Seal)
WILLIAM DUFFIELD	(Seal)
FRED R. DELAPPE	(Seal)
ALFRED L. PHILLIPS	(Seal)
ROBERT A. PEERS	(Seal)
HENRY S. ROGERS	(Seal)
JOSEPH CATTON	(Seal)
EDWARD M. PALLETTE	(Seal)
GEORGE G. HUNTER	(Seal)
R. A. CUSHMAN	(Seal)
JOHN H. GRAVES	(Seal)
EDWARD N. EWER	(Seal)
WALTER B. COFFEY	(Seal)
GAYLE G. MOSELEY	(Seal)

State of California  
County of Monterey—ss.

On the first day of May, in the year one thousand nine hundred and thirty, before me, Frank C. Jakobs, a notary public in and for the County of Monterey, State of California, residing therein, duly commissioned and sworn, personally appeared

O. D. Hamlin	Alfred L. Phillips
Lyell C. Kinney	Robert A. Peers
J. B. Harris	Henry S. Rogers
T. Henshaw Kelly	Joseph Catton
Emma W. Pope	Edward M. Palette
George H. Kress	George G. Hunter
Mott H. Arnold	R. A. Cushman
William Duffield	John H. Graves
Fred R. DeLappe	Edward N. Ewer

known to me to be the persons described in, whose names are subscribed to and who executed the within and annexed instrument, and acknowledged to me that they executed the same.

In Witness Whereof, I have hereunto set my hand and affixed my official seal, at my office in the County of Monterey, State of California, the day and year in this certificate first above written.

(Seal) FRANK C. JAKOBS,  
Notary Public in and for the County of Monterey, State of California.

My commission expires February 17, 1933.

### "FULL STEAM" OR CAUTION IN SOCIAL SECURITY

When the Committee on the Costs of Medical Care brought in its final report, *The Journal*<sup>1</sup> pointed out that the choice seemed to lie with the medical profession and the public as to whether or not changes in the nature of medical practice were to come by evolution or by revolution. In the years that have elapsed, the public seems wisely to have chosen to proceed cautiously and carefully rather than to order "full steam ahead." Nevertheless, proponents of socialized medicine continue to urge and to make propaganda for the revolution that the medical profession and the public want to avoid. Conspicuous among those who demand haste are Michael Davis, representing the Rosenwald Foundation; Nathan Sinai, who has at various times represented various groups, and Dr. Hugh Cabot, who seems mostly to represent himself.

In a recent discussion on the subject of social security, held in the Graduate School of Business Administration of Harvard University, these three proponents of speed again stated their points of view. Doctor Cabot did not hesitate to say that the medical profession does not seem to be able to fit itself into an economic age and that it should long since have realized that it must become a business and cease to be a profession. Mr. Sinai deplored the manner in which his plans for Michigan had been opposed and indicated his impression that the medical profession in this country is an obstructionist body. Mr. Davis, who has on previous occasions stated his belief that medicine proceeds on a bicycle while civilization proceeds in an airplane, again bemoaned the delay of the American medical profession in adopting some of the plans which he and his associates of the Rosenwald Foundation have been so busily pushing during the last four years. In the course of their discussions, these proponents of socialized medicine condemned the principles adopted by the House of Delegates of the American Medical Association at the Cleveland and subsequent sessions as being planned to delay rather than to hasten progress. Anyone familiar with the changes that have occurred, with the experiments that are now under way, and with the statements made by representatives of organized medicine during the past three years, will know that the allegations of these three propagandists are not warranted. The studies made by the Bureau of Medical Economics of the American Medical Association indicate that already many an ill-founded and unwarranted experiment in changing the nature of medical practice has failed and disappeared. As yet there is no scientific evidence to indicate that any one of the plans now in effect represents the ideal.

The substantial progress of medicine has been brought about by a system of trial, of test and experiment, which is itself responsible for the substantial character of the progress. There is no more reason why medicine should discard its scientific methods in performing social experiments than there is reason for discarding scientific methods and embarking on wishful thinking in the laboratory and faith-healing in the hospital. Reckless experimenters in the so-called social sciences may shout "full steam ahead!" The organization and structure of scientific medicine is more likely to be salvaged from the wreckage into which many of the other social and economic organizations are plunging by observing the caution which medical leaders know is imperative for a safe advance.—*Journal of the American Medical Association*, May 16, 1936.

<sup>1</sup> The Committee on the Costs of Medical Care, editorial, J. A. M. A., 99:1950 (Dec. 3), 1932.

### MORTALITY FROM CERTAIN DISEASES AMONG CHILDREN UNDER FIFTEEN YEARS OF AGE IN CALIFORNIA 1906-1934

By WALTER M. DICKIE, M.D.  
San Francisco

#### PART II\*

During school age, deaths from whooping-cough are not common, and when they do occur are usually in the lower brackets of 5 to 14 age group. They are somewhat constant in numbers during the entire period studied, but because of the increase in population of this group, we find the rates decreasing from 2.7 per 100,000 in 1906-1909 to 0.6 per 100,000 group population in 1930-1934.

Mortality from Whooping Cough, 1906-1934

Years	Under 1 yr.		1-4 years		5-14 years	
	Number	Rate	Number	Rate	Number	Rate
1906-1909	380	258.1	234	41.4	36	2.7
1910-1914	618	284.6	435	51.5	49	2.5
1915-1919	519	205.9	346	33.9	31	1.3
1920-1924	814	274.2	478	38.6	58	1.9
1925-1929	876	249.2	510	34.0	44	1.1
1930-1934	545	136.3	305	17.7	27	0.6

#### DIPHTHERIA

During the twenty-nine years under study, deaths from diphtheria have decreased markedly in children under fifteen years of age. Death rates from this cause among this group have fallen from 55.9 to 10.1 or 82.0 per cent between the first and the last period studied, the largest reduction being among children 5 to 14 years of age. As in scarlet fever and whooping-cough, this reduction has been gradual and continuous with the exception of the years 1920-1924, when there was a rise above the previous years.

During 1906-1909, there are sixty-three children under one year of age who died, with a rate of 42.8 per 100,000 children in this class. This fluctuates, with a rise in 1920-1924 to 32.0 per 100,000 group population with ninety-five deaths and then falls to a low point during 1930-1934 of forty-eight deaths, or a rate of 12.0 per 100,000 group population.

The age group 1 to 4 contributes a large number of deaths to this disease. There are 558 deaths, with a corresponding group rate of 98.8 per 100,000 population in 1906-1909. The number falls and then rises to a high point of 1,107 deaths, although the rate does not rise above that of 1906-1909, but reaches 89.3 per 100,000 group population. Both numbers and rates then fall to 346 and 20.1, respectively, in 1930-1934. The percentage drop in rate from 1906-1909, when it is 42.8, to 12.0 per 100,000 population in 1930-1934, is the smallest of the three groups, being 72.0 per cent decrease.

The age group 5 to 14 exhibits the greatest percentage drop in rate of the three groups under study. In 1906-1909 there are 515 deaths, with a corresponding rate of 39.1. This rises in 1920-1924 to 1,569 deaths with a rate of 50.2, and then falls ten years later to 289 deaths with a rate of 6.3. This rate is 83.9 per cent lower than that of 1906-1909, and 87.4 per cent lower than the rate for the years 1920-1924. The decrease in rate in this age group is 79.7 per cent, falling from 98.8 per 100,000 population in 1906-1909 to 20.1 in 1930-1934.

Mortality from Diphtheria, 1906-1934

Years	Under 1 yr.		1-4 years		5-14 years	
	Number	Rate	Number	Rate	Number	Rate
1906-1909	63	42.8	558	98.8	516	39.1
1910-1914	47	21.6	463	54.8	406	20.6
1915-1919	63	25.0	564	55.2	537	21.9
1920-1924	95	32.0	1,107	89.3	1,569	50.2
1925-1929	57	16.2	567	37.8	545	13.7
1930-1934	48	12.0	346	20.1	289	6.3

#### DYSENTERY

Deaths from dysentery include all forms of dysentery, bacillary, amebic, and unspecified. These have not been

\* Part I of this article was printed in the May issue of CALIFORNIA AND WESTERN MEDICINE, beginning with page 454.